

AUG 17 2005

**FAX TRANSMISSION****DATE:** August 17, 2005**PTO IDENTIFIER:** Application Number 09/704904-Conf. #4614  
Patent Number**Inventor:** Richard HAYTON et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP  
John D. Lanza**PHONE:** (617) 227-7400**Attorney Dkt. #:** CXT-054RCE**PAGES (Including Cover Sheet):** 22**CONTENTS:** Fee Transmittal (1 page in duplicate)  
Amendment (14 pages)  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page in duplicate)  
Amendment Transmittal (1 page in duplicate)  
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Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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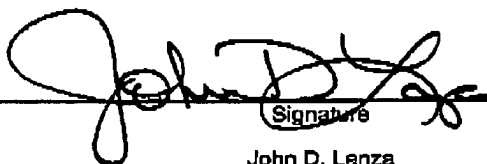
Application No. (If known): 09/704804

Attorney Docket No.: CXT-054RCE

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on August 17, 2005  
Date



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John D. Lenza

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40,080

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Fee Transmittal (1 page in duplicate)

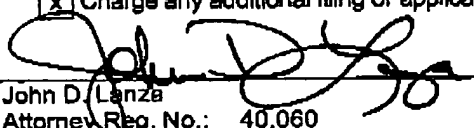
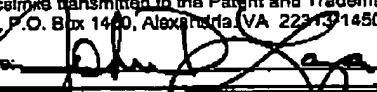
Amendment (14 pages)

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page in duplicate)

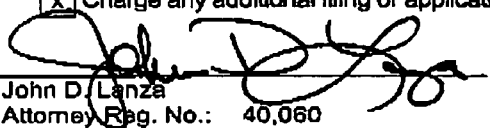
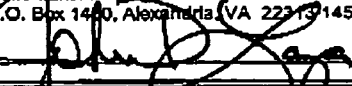
Amendment Transmittal (1 page in duplicate)

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<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. CXT-054RCE	
Application No. 09/704904-Conf. #4614	Filing Date November 2, 2000	Examiner M. H. Pollack	Art Unit 2145	
Applicant(s): Richard HAYTON et al.				
Invention: METHODS AND APPARATUS FOR REGENERATING AND TRANSMITTING A PARTIAL PAGE				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	23	- 29 =		x
Independent Claims	3	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within first month				120.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				120.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-0080</u> in the amount of \$ <u>120.00</u> . A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 John D. Lanza Attorney Reg. No.: 40,060			Dated: <u>August 17, 2005</u>	
LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400				
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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. CXT-054RCE	
Application No. 09/704904-Conf. #4614		Filing Date November 2, 2000		Examiner M. H. Pollack	
				Art Unit 2145	
Applicant(s): Richard HAYTON <i>et al.</i>					
Invention: METHODS AND APPARATUS FOR REGENERATING AND TRANSMITTING A PARTIAL PAGE					
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Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	23	- 28 =		x	
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					120.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
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Effective on 12/09/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL

### For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$)		120.00	
Application Number		09/704904-Conf. #4814			
Filing Date		November 2, 2000			
First Named Inventor		Richard HAYTON			
Examiner Name		M. H. Pollack			
Art Unit		2145			
Attorney Docket No.		CXT-054RCE			

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

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☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** 23 - 20 = 3 x 200 = 600 **Fee Paid (\$)**

**Indep. Claims** 3 - 3 = 0 x 200 = 0 **Fee Paid (\$)**

**3. APPLICATION SIZE FEE**

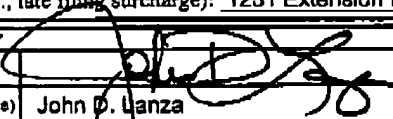
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>23</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

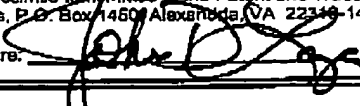
**4. OTHER FEE(S)**

Description	Fee (\$)	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00	

**SUBMITTED BY**

Signature 	Registration No. (Attorney/Agent)	40,060	Telephone	(617) 227-7400
Name (Print/Type)	John D. Lanza		Date	August 17, 2005

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Dated: August 17, 2005 Signature:  (John D. Lanza)

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## FEE TRANSMITTAL

### For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)		120.00	
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<b>Complete If Known</b>	
Application Number	09/704904-Conf. #4614
Filing Date	November 2, 2000
First Named Inventor	Richard HAYTON
Examiner Name	M. H. Pollack
Art Unit	2145
Attorney Docket No.	CXT-054RCE

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
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Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
23	- 20 =	x		<b>Fee (\$)</b>
				<b>Fee Paid (\$)</b>

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
3	- 3 =	x	


**3. APPLICATION SIZE FEE**

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<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
	- 100 =	/50	(round up to a whole number) x	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)	
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	<b>Fees Paid (\$)</b>

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Signature		Registration No. (Attorney/Agent)	40,080
Name (Print/Type)	John D. Lanza	Telephone	(617) 227-7400
		Date	August 17, 2005

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